

The Thomas S. Szasz, M.D. Cybercenter for Liberty and Responsibility

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Karl Menninger, M.D.

Reading Notes, *Bulletin of the Menninger Clinic*, Vol. 53, No. 4, July 1989, pp. 350-352.

October 6, 1988

REFORMATTED AND EMPHASIS ADDED

Dear Dr. Szasz:

I am holding your new book, *INSANITY: THE IDEA AND ITS CONSEQUENCES*, in my hands. I read part of it yesterday and I have also read reviews of it. I think I know what it says but I did enjoy hearing it said again. I think I understand better what has disturbed you these years and, in fact, - it disturbs me, too, now. We don't like the situation that prevails whereby a fellow human being is put aside, outcast as it were, ignored, labelled and said to be "sick in his mind." If he can pay for care and treatment, we will call him a patient and record a "diagnosis" (given to his relatives for a fee). He is listened to and then advised to try to relax, consider his past sins to be forgiven, renounce his visions or voices or fits, quit striking his neighbour's windows with his cane or otherwise making himself conspicuous by eccentric behaviour. He tries.

For this service we charge, now. Doctors were once satisfied with a gift, or token, or sometimes just an earnest verbal expression of gratitude. Even if the treatment given was not immediately curative, the doctor had done the sagacious and difficult task of having approached the crazy subject and listened to him and given the condition a NAME, and a prognosis. (In fact, the latter was what he was a specialist in; treatment was really secondary.) You and I remember that there didn't used to be any treatments, just care and prognosis; "fatal", "nonfatal", "serious", "committable" and "non-psychotic". Gradually empirical and chemical agents were discovered which seemed to alter something in the organism which was reflected in the customer's changed behaviour. We accumulated a few methods that seemed to relieve the suffering of these customers, our "patients." We used prolonged baths, cold sheet packs, diathermy, electric shock, and there were all those other treatments of whipping, strapping down, giving cold douches and sprays. King George III of England was slapped and punched by the fists of one of his "nurses" who later bragged that he even knocked his patient, the King, to the floor "as flat as a flounder". And the King ultimately recovered but those treatments weren't outlawed. Added to the beatings and chaining and the baths and massages came treatments that were even more ferocious: gouging out parts of the brain, producing convulsions with electric shocks, starving, surgical removal of teeth, tonsils, uteri, etc.

Next someone discovered some chemicals that had peculiar effects on people who swallowed them. Alcohol was already well known and opium and morphine and heroin and cocaine; but Luminal was introduced and "Seconal" and similar pharmaceutical concoctions given names ending in "al" or "ol" (as in Demerol). These were regarded as therapeutically useful because they did dispel some of the symptoms and they made the patient feel better (briefly). No baths, no brain operations, no chemicals, no electric shocks, no brain stabbing.

Long ago I noticed that some of our very sick patients surprised us by getting well even without much of our "treatment." We were very glad, of course, but frequently some of them did something else even more surprising. They kept improving, got "weller than well" as I put it, better behaved and more comfortable or reasonable than they were before they got into that "sick" condition. We didn't know why. But it seemed to some of us that kind of the "sickness" that we had seen was a kind of conversion experience, like trimming a fruit tree, for example.

Well, enough of those recollections of early days. You tried to get us to talk together and take another look at our material. I am sorry you and I have gotten apparently so far apart all these years. We might have enjoyed discussing our observations together. You tried; you wanted me to come there, I remember. I demurred. Mea culpa.

Best wishes.

Sincerely,
Karl Menninger, M.D.

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And Dr. Szasz's response to Dr. Menninger:

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October 12, 1988

Dear Dr. Menninger:

I was deeply touched by your generous and moving letter. Thank you for writing it.

As you must have felt and known, I have always had the deepest respect for you- for your sincerity, your integrity, last but not least because I realized that you wanted to hold on to the values of free will and responsibility and were struggling to reconcile them with psychiatry.

For myself, I felt sure, long before I switched my residency from medicine to psychiatry, that this was impossible, that psychiatry was basically wrong (because "mental illness" was existential, not medical). I thought there was something worthwhile in psychoanalysis, and there is, though **one must dig it out from the rubble in which the psychoanalytic bureaucracy has buried it.**

I will always treasure this letter. It is, of course, a piece of psychiatric history. Because it is, I am prompted to ask if you would grant me the permission, and the privilege, to cite it, in whole or in part. (I have no specific occasion in mind, at the moment.) I will respect your no, of course; in the meanwhile I will treat the letter as the personal correspondence it is.

I enclose a few small items which I hope you will find of interest.

With affection and best wishes,

Cordially,
Thomas S. Szasz, M.D.

Thomas S. Szasz Cybercenter for Liberty and Responsibility:

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